PART B - FEE(S) TRANSMITTAL

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appropriate. All further cor indicated unless corrected be	respondence including the loclow or directed otherwise	Patent, advance or	rders and notificat	ion of maintenance fees	uired). Blocks I through 5 s will be mailed to the curren- is; and/or (b) indicating a sep	t correspondence address a		
26694 75 . VENABLE LLP P.O. BOX 34385	E ADDRESS (Note: Use Block 1 for 90 02/09/2006	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
WASHINGTON, I 5/09/2006 EAREGAY2 000		/ Mw.						
1 FC:1501 1400.(OO SATENT !	-CHART			(Depositor's name) (Signature)		
2 FC:1504 300.0		W.	TRAUC			(Date)		
AZPLICATION NO.	FILING DATE		FIRST NAMED INV	/ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/841,168	04/24/2001		John C. Dro	ge	35997-217062	4113		
	YSTEM AND METHOD FO	,						
APPLN. TYPE	SMALL ENTITY	ISSUE F.		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO \$1400)	\$300	\$1700	05/09/2006		
EXAMINER			IIT	CLASS-SUBCLASS				
LEMMA, S		2132		713-151000				
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat	e address or indication of "For lence address (or Change of 622) attached. ion (or "Fee Address" Indicator more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (pri	nt or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	elow, no assignee of this form is NO	data will appear of T a substitute for fi	on the patent. If an assignment.	mee is identified below, the c	locument has been filed for		
(A) NAME OF ASSIGN				: (CITY and STATE OR	COUNTRY)			
Safenet, Inc.			Belcam	p, MD				
Please check the appropriate	assignee category or categor	ries (will not be pr	inted on the patent): 🗖 Individual 🔯(Corporation or other private gr	oup entity Government		
Aa. The following fee(s) are Issue Fee Publication Fee (No so Advance Order - # of	mall entity discount permitte	d)	Payment by co	e amount of the fee(s) is e redit card. Form PTO-203		edit any overpayment, to		
	(from status indicated above MALL ENTITY status. See 3)			ALL ENTITY status. See 37 C			
The Director of the USPTO NOTE: The Issue Fee and Punterest as shown by the reco	is requested to apply the Issuublication Fee (if required) words of the United States Pate	te Fee and Publicate vill not be accepted and Trademark	tion Fee (if any) or I from anyone othe Office.	to re-apply any previous or than the applicant; a re-	sly paid issue fee to the applica gistered attorney or agent; or the	ation identified above. he assignee or other party in		
Authorized Signature	Orvesit	auth	\mathcal{D}_{\perp}	Date 5	18/2006			

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PTO/SB/17 (01-06)
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Under the Raperwork Re	Motion Act of 1995	, no person are re	aquired to	respond to a co	llection of infor	mation unless it display	s a valid OME	3 control number.				
Fees pursuant to the Consolid	Complete if Known											
· · · · · · · · · · · · · · · · · · ·				Application Number			09/841,168-Conf. #4113					
FEE TRANSMITTAL				Filing Date		April 24, 2001						
For	r FY 2000	6	ļ	First Named Inventor		John C. Droge						
				Examiner N	lame	Not Yet Assig	Not Yet Assigned					
Applicant claims sm	all entity status.	See 37 CFR 1.2	7	Art Unit		N/A						
TOTAL AMOUNT OF PA	YMENT	(\$) 1,700.0	10	Attorney Do	ocket No.	35997-217062	35997-217062					
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
X Deposit Account De	x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP											
L					norized to: (c	check all that apply)	_				
X Charge fee((s) indicated be	low		С	harge fee(s)) indicated below, e	except for t	he filing fee				
X Charge any	additional fee(ser 37 CFR 1.16	s) or underpay	ment of	×С	redit any ov	erpayments						
FEE CALCULATION			ue upo	n filing or r	may be su	bject to a surch	arge.)					
1. BASIC FILING, SEAR												
		G FEES	SE	ARCH FEE		MINATION FEES	}					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Er Fee (\$		\$\frac{\Small Entity}{\Pi}\$	Fees	Paid (\$)				
Utility	300	150	500				-					
Design	200	100	100									
Plant	200	100	300									
Reissue	300	150	500	250	-							
Provisional	200	100	0	0		0 0						
2. EXCESS CLAIM FEES			•	-		-		Small Entity				
Fee Description							Fee (\$)	Fee (\$)				
Each claim over 20 (inclu	,	•					50 200	25				
Each independent claim of		ig Keissues)					200 360	100 180				
Multiple dependent claim		/e\	500	Paid (\$)		Multiple Depend						
Total Claims Extr		ee (\$) =	Fee	raiu (ə)			Fee Paid (•				
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Indep. Claims Extr		ee (\$)	Fee f	Paid (\$)								
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets	Extra Sheets	Number	of each a	idditional 50 o	or fraction the	ereof Fee (\$)	<u>Fee</u>	Paid (\$)				
		/50		(round up to	a whole numb	per) x	=					
4. OTHER FEE(S) Fees Paid (\$)												
Other (e.g., late filing	1,400.00 300.00											
SUBMITTED BY		$\frac{1}{2}$	$\overline{}$									
Signature	M WY	Tuy		Registration N (Attorney/Agent	o. 31,59	94 Telephone	(202) 34	4-4000				
Name (Print/Type) Ames	R Burdett		*		<u></u>	Date	May 8	2006				